PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or	Docket	Number

~	,	250	•	٠.	Secret	-
£ 1.	,				5	16.4
Ŋ.,,					7,7	€.7

	(Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER SMALL E		
ļ	TC	TAL CLAIMS							RATE	FEE	ĺ	RATE	FEE
	FO	DR NUMBER FILED			ILED	NUMBI	ER EXTRA	BASIC FEE			OR	BASIC FEE	890
	то	TAL CHARGEA	BLE CLAIMS	20 min	us 20=	•			X\$ 9=	,	OR	X\$18=	
	IND	EPENDENT CL	AIMS	3 mir	nus 3 =	•			X40=		OR	X80=	
<i>i</i> ·	MU	ILTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=		OR	+270=		
	* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	890
	CLAIMS AS AMENDED - PART II								SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
Į		ligara para pera pera pera pera pera pera p	(Column 1) CLAIMS	12000 1200 1200 1200 1200 1200 1200 120		mn 2) HEST	(Column 3)	_	SMALL		OR	SMALL	
	ENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	AMENDMENT	Total	. 22	Minus	** 0	20	= 2		X\$ 9=	• •	OR	X\$18=	360
	AME	Independent	TATION OF M	Minus	***	<u>3</u>	= /		X40=		OR	X8 0=	8400
	L	TINOT FRESE	TATION OF MI	OLITE DEF	CINDEIN	TOLATIVI			+135=		OR	+270=	
								Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	1200
			(Column 1)	- i		mn 2)	(Column 3)				_		pQ.
	AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	AME	Independent		Minus	***		=		X40=		OR	X80=	
	L		NTATION OF M	ULTIPLE DEF	ENDEN	I CLAIM		!	.105		1	+270=	
: N.	T. a.	Zostowo swe						L	+135≈ TOTAL		OR	+270= TOTAL	
333	1.10	4						A	DDIT. FEE		OR	ADDIT. FEE	
12.19	*: 1		(Column 1)			mn 2)	(Column 3)						
	LENTIC		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
. M	VON	Jotal	*	Minus	**		=		X\$ 9=		OR	X\$18=	•
	AMENDMEN	Independent	NTATION OF M	Minus	PENDEN	T CLAIM	=		X40=		OR	X80=	
	ERSTPRESENTATION OF MULTIPLE DEPENDENT CLAIM							¹	+135=		OR	+270=	
***	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20							L	TOTAL		OR	TOTAL	
***	16.4	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."		DDIT. FEE			ADDIT. FEE	
被猶	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box in column 1.												